(1)					DT0/02/07/44				
Approved for use through 7/31/2006. OMB 0651-0									
Under the Paperworld Reduction Act of 1995, no persons are requi	ired to	espond	to a coll	atent an ection c	nd Trademark Office; U.S. DEPARTMENT OF COMMERC of information unless it displays a valid OMB control number				
FEETRANSMITTAL			Complete if Known						
			cation	Numb	per 09/639,990				
for FY 2004			Date		August 16, 2000				
Effective 10/01/2003, Patent fees are subject to annual revision.		First Named Inventor			ntor Jun TANIDA et al.				
Ellective 10/01/2003, Faterix 1003 and Subject to annual revision.		Examiner Name			Yogesh K. Aggarwal				
Applicant claims small entity status. See 37 CFR 1.27		Art Ur	nit		2615				
TOTAL AMOUNT OF PAYMENT (\$) 900.00		Attor	ey Do	cket N	lo. 325772019100				
METHOD OF PAYMENT (check all that apply)	ļ			FEE	E CALCULATION (continued)				
Check Credit Money Other None	3. ADDITIONAL FEES								
X Deposit Account:									
Deposit Count.	Large Entity Small Entity				,				
Account Number 03-1952	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description Fee Paid				
Deposit		• • •			ree Paid				
Account Morrison & Foerster LLP	1051	130	2051	65	Surcharge – late filing fee or oath				
The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet.				
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English specification				
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2 520	For filing a request for ex parte reexamination				
The state of the s	1804	920*	1804	920*	Requesting publication of SIR prior to				
Charge fee(s) indicated below, except for the filing fee					Examiner action Requesting publication of SIR after				
to the above-identified deposit account.		1,840*	1805	1,840°	Examiner action				
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month 110.00				
1. BASIC FILING FEE Large Entity Small Entity	1252 1253	420 950	2252	210 475	Extension for reply within second month				
Fee Fee Fee Fee Description Fee Paid	1254	1,480	2254	740	Extension for reply within third month Extension for reply within fourth month				
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255		2255		Extension for reply within fifth month				
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal				
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal				
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing				
1005 160 2005 80 Provisional filing fee	1451	1,510	1451		Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to revive – unavoidable				
O SYTDA OLAMA EFFO FOR LITH IDV AND DELOCHE	1453 1501	1,330	2453 2501	665 665	Petition to revive - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1502	480	2502	240	Utility issue fee (or reissue) Design issue fee				
Total Claims - 20 = 0 x = 0.00	1503	640	2502		Plant issue fee				
Independent 3 = 0 V = 000	1460	130	1460	130	Petitions to the Commissioner				
Claims Substituting Claims	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure Stmt				
Fee Fee Fee Fee Fee Description	8021	40	8021	40	Recording each patent assignment per				
Code (\$) Code (\$) Fee Description					property (times number of properties) Filing a submission after final rejection				
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	(37 CFR 1.129(a))				
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be examined (37CFR 1.129(b))				
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	Request for Continued Examination (RCE) 790.00				
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for expedited examination of a design application				
and over original patent	Other	fee (spe	cify)						
SUBTOTAL (2) (\$) 0.00	*Red	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)							
**or number previously paid, if greater; For Reissues, see above									
SUBMITTED BY	De -ici	matio = A1			(Complete (if applicable))				
Name (Print/Type) Adam Keser	regist	ration No	. 54	217	Telephone (703) 760-7301				

SUBMITTED BY		(Complete (if applicable))			
Name (Print/Type	Adam Keser	Registration No. (Attorney/Agent)	54,217	Telephone	(703) 760-7301
Signature	an - C			Date	November 19, 2004